

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## UTILITY PATENT APPLICATION TRANSMITTAL

Total Pages

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: JEAN WOLOSZKO ET AL.  
TITLE: MEDICAL ELECTRICAL LEAD

Assistant Commissioner for Patents

## BOX PATENT APPLICATION

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Via Courier

Sir:

We are transmitting herewith the attached:

☒ Patent Application Transmittal☒ Specification:Total pages: 15 (including claims and abstract) :Spec. 10 sheets; Claims 4 sheets;  
Abstract 1 sheet☒ Drawings:Total sheets: 11  
☐ formal ☒ informal

## Combined Declaration and Power of Attorney:

- ☐ newly executed  
☒ copy from prior application  
☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))  
☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

## Accompanying application parts:

- ☐ Notification of filing a  
☐ Assignment of the Invention to Medtronic, Inc.  
☒ Information Disclosure Statement  
☒ Information Disclosure Statement of prior application  
☒ PTO Form 1449 of prior application  
☐ Copies of IDS citations  
☒ Preliminary Amendment  
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.  
☒ Return Postcard

## IF A CONTINUING APPLICATION:

- ☐ Continuation of prior application No. 08/820,473. ☒ Divisional ☐ Continuation-in-part (CIP)
- ☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation ☐ division ☐ continuation in part of application number    , filed    .
- ☐ Cancel in this application original claims     of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)
- ☒ The prior application is assigned of record to Medtronic, Inc.
- ☒ The Power of Attorney in the prior application is to: Medtronic, Inc.

- ☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) \_\_\_\_\_, filed \_\_\_\_\_.
- ☐ Address all future correspondence to:

Thomas F. Woods, Reg. No. 36,726  
**Medtronic, Inc.**, MS 301  
 7000 Central Avenue NE  
 Minneapolis, Minnesota 55432  
 phone: (612)514-3652

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	06	20	= 02	x 18	\$
Independent Claims	01	03	= 02	x 78	\$
Multiple Dependent Claims				+ 270	
Basic Filing Fee					\$690
TOTAL					<b>\$690</b>

- X Charge Deposit Account No. 13-2546 the sum of \$ 690.00 (Filing Fee) for a total of \$ 690.00.
- X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

Date

2-24-2000

  
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